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| APPLICATION NUMBER | FILING/RECEIPT DATE |                        | FIRST NAMED APPLICANT | ATTORNEY DOCKET NO./TITLE |             |  |  |
|--------------------|---------------------|------------------------|-----------------------|---------------------------|-------------|--|--|
| 09/444,317         | 11/22/99            | 1 IPSCUME              | i e                   | J                         | SE9-99-007- |  |  |
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022271221

MORGAN & FINNEGAN ILP

345 PARK AVENUE NEW YORK NY 10154 NOT ASSIGNED

2781

**DATE MAILED:** 

12/21/99

## NOTICE TO FILE MISSING PARTS OF APPLICATION Filing Date Granted

An Application Number and Filing Date have been assigned to this application. The items indicated below, however, are missing. Applicant is given TWO MONTHS FROM THE DATE OF THIS NOTICE within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1:136(a). If any of items 1 or 3 through 5 are indicated as missing, the SURCHARGE set forth in 37 CFR 1.16(e) of □ \$65.00 for a small entity in compliance with 37 CFR 1.27, or 3130.00 for a non-small entity, must also be timely submitted in reply to this NOTICE to avoid abandonment.

|   |   | his form are∕filed w<br>nt filed) ☑ non-sma  | ithin the period set above, t   | the total a   | amount ow     | ved by app | licant as a    |     |  |  |  |  |
|---|---|--|---|---------------|---------------|------------|----------------|-----|--|--|--|--|
| 1.  | The statutory basic  missing. insufficient.  Applicant must sub claiming such statu | filing fee is:   | to complete the basi  | ic filing fee | ə and/or file | a small en | ntity statemer | nt  |  |  |  |  |
|   | \$  | _for   | _total claims over 20.  |               |               |            |                |     |  |  |  |  |
|   | \$  | _for   | _independent claims over 3.   |               | , j. 6        |            |                |     |  |  |  |  |
| \$for multiple dependent claim surcharge.  Applicant must either submit the additional claim fees or cancel additional claims for which fees are due. |   |  |   |               |               |            |                |     |  |  |  |  |
| <b>Z</b> 3.   | The oath or declar  |  |   |               |               |            |                |     |  |  |  |  |
|   | does not cover the newly submitted items.   |  |   |               |               |            |                |     |  |  |  |  |
|   |   | An oath or declaration in compliance with 37 CFR 1. 63, including residence information and identifying the application by the above Application Number and Filing Date is required. |   |               |               |            |                |     |  |  |  |  |
| 4. The signature(s) to the oath or declaration is/are by a person other than inventor or person qualified under 37 CF                                 |   |  |   |               |               |            |                |     |  |  |  |  |
| 1.43 or 1.47.  A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above                         |   |  |   |               |               |            |                |     |  |  |  |  |
| Application Number and Filing Date, is required.  |   |  |   |               |               |            |                |     |  |  |  |  |
| □ 5.  | The signature of the  | following joint inven  | tor(s) is missing from the oath   | n or decla    | ration:       | ÷          |                |     |  |  |  |  |
|   |   |  | th 37 CFR 1.63 listing the nar<br>y the above Application Num                             |               |               |            |                | эd  |  |  |  |  |
|   |   | • . •  | nce your check was returned   |               |               | (37 CFR 1  | l.21(m)).      |     |  |  |  |  |
|   | • • •   | as mailed in error be<br>filed in a language o   | cause your check was returned   | ea withou     | t payment.    |            |                |     |  |  |  |  |
| <b>□ 0.</b>   | Applicant must file   | a verified English tra   | nner man English.<br>nslation of the application, the<br>that the translation is accurate |               |               | 37 CFR 1   | .17(k), unles  | s . |  |  |  |  |
| □ 9.  | OTHER:  | ·  |   |               | ·             | ···        |                |     |  |  |  |  |
| Direc   | t the reply and any q   | uestions about this n  | otice to "Attention: Box Missi  | ng Parts."    |               |            |                |     |  |  |  |  |

A copy of this notice <u>MUST</u> be returned with the reply.